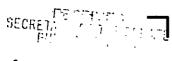
FEC FORM 1

STATEMENT OF ORGANIZATION



08 FEB -4 PM 1:06

Office Use Only

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
[Fischer For us senate			
ADDRESS (number and street) ▼	[1:3,5,5] Barids	stown Rd 1	1.3
(Check if address is changed)	Lowismille	2	1Ky1 14.0,20.41-11.3,5,3
		ITY A	STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRESS LinforgiregificsichierCom			
COMMITTEE'S WEB PAGE ADDRESS (URL)			
Www.gregfischer.com			
COMMITTEE'S FAX NUMBER			
2. DATE 0 1 1	5 2008		
3. FEC IDENTIFICATION NU	JMBER ▶ C	•	
4. IS THIS STATEMENT X	NEW (N) OR	AMENDED (A)	
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.			
Type or Print Name of Treasurer <u>Ruth Payne</u>			
Signature of Treasurer	Ruth Payne		Date 0 1 1 5 2008
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.			
Office Use Only		For further information of Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FFT. FT INTRE

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